

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Alhambra Democratic Club - Fed

ADDRESS (number and street)

PO Box 3322

☐Check if different  
than previously  
reported. (ACC)

Alhambra

CA

91803

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00302711

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☒July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Nina Sharky

Signature of Treasurer

Electronically Filed by Nina Sharky

Date

07

31

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 10

Write or Type Committee Name  
Alhambra Democratic Club - Fed

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 1 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1 <div>2009</div>                                                                 |                         | 43.57                             |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....                                                       | 43.57                   |                                   |
| (c) Total Receipts (from Line 19) .....                                                                          | 5521.00                 | 5521.00                           |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 5564.57                 | 5564.57                           |
| 7. Total Disbursements (from Line 31) .....                                                                      | 5324.00                 | 5324.00                           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 240.57                  | 240.57                            |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 1075.41                 |                                   |

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Alhambra Democratic Club - Fed

Report Covering the Period:

From:

|   |   |
|---|---|
| M | M |
| 0 | 1 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

To:

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| I. Receipts                                                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                             |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                                                |                               |                                   |
| (i) Itemized (use Schedule A) .....                                                                    | 0.00                          | 0.00                              |
| (ii) Unitemized .....                                                                                  | 5521.00                       | 5521.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....                                                         | 5521.00                       | 5521.00                           |
| (b) Political Party Committees .....                                                                   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....                                                    | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 5521.00                       | 5521.00                           |
| 12. Transfers From Affiliated/Other Party Committees .....                                             | 0.00                          | 0.00                              |
| 13. All Loans Received .....                                                                           | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....                                                                     | 0.00                          |                                   |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           |                               | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....                                           | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds                                                         |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....                                                       | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....                                                               | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).                                                              | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 5521.00                       | 5521.00                           |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 5521.00                       | 5521.00                           |

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS                                                                              |         | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|---------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |         |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |         |                               |                                   |
| (i) Federal Share.....                                                                         | 0.00    | 0.00                          |                                   |
| (ii) Non-Federal Share.....                                                                    | 0.00    | 0.00                          |                                   |
| (b) Other Federal Operating Expenditures.....                                                  | 5224.00 | 5224.00                       |                                   |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤                        | 5224.00 | 5224.00                       |                                   |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00    | 0.00                          |                                   |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 100.00  | 100.00                        |                                   |
| 24. Independent Expenditure (use Schedule E) .....                                             | 0.00    | 0.00                          |                                   |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00    | 0.00                          |                                   |
| 26. Loan Repayments Made.....                                                                  | 0.00    | 0.00                          |                                   |
| 27. Loans Made.....                                                                            | 0.00    | 0.00                          |                                   |
| 28. Refunds of Contributions To:                                                               |         |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00    | 0.00                          |                                   |
| (b) Political Party Committees                                                                 | 0.00    | 0.00                          |                                   |
| (c) Other Political Committees (such as PACs) .....                                            | 0.00    | 0.00                          |                                   |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00    | 0.00                          |                                   |
| 29. Other Disbursements.....                                                                   | 0.00    | 0.00                          |                                   |
| 30. Federal Election Activity (2 U.S.C 431(20))                                                |         |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)                                        |         |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00    | 0.00                          |                                   |
| (ii) "Levin" Share .....                                                                       | 0.00    | 0.00                          |                                   |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00    | 0.00                          |                                   |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00    | 0.00                          |                                   |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 5324.00 | 5324.00                       |                                   |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 5324.00 | 5324.00                       |                                   |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 5521.00                       | 5521.00                           |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 5521.00                       | 5521.00                           |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 5224.00                       | 5224.00                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 5224.00                       | 5224.00                           |

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Alhambra Democratic Club - Fed

|                                                                                                                                      |                                                                                                                                   |
|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>AMAC                                                                            | <b>Transaction ID:</b> SB21b000000000659368<br><b>Date of Disbursement</b>                                                        |
| Mailing Address 114 S Catalina Av                                                                                                    | <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 7 / 2 0 0 9</div> </div>                                                        |
| City Redondo Beach State CA Zip Code 90277                                                                                           | <b>Amount of Each Disbursement this Period</b>                                                                                    |
| Purpose of Disbursement Labels/Robo Calls<br>Candidate Name                                                                          | <div> <div>551.00</div> <div>001</div> <div>Category/Type</div> </div>                                                            |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>City Of Alhambra                                                                | <b>Transaction ID:</b> SB21b000000000659366<br><b>Date of Disbursement</b>                                                        |
| Mailing Address 111 South First Street                                                                                               | <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 3 / 2 0 0 9</div> </div>                                                        |
| City Alhambra State CA Zip Code 91801                                                                                                | <b>Amount of Each Disbursement this Period</b>                                                                                    |
| Purpose of Disbursement Donation<br>Candidate Name                                                                                   | <div> <div>300.00</div> <div>012</div> <div>Category/Type</div> </div>                                                            |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mary Dorel                                                                      | <b>Transaction ID:</b> SB21b000000000659356<br><b>Date of Disbursement</b>                                                        |
| Mailing Address 501 E Longden Dr                                                                                                     | <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 7 / 2 0 0 9</div> </div>                                                        |
| City San Gabriel State CA Zip Code 91775                                                                                             | <b>Amount of Each Disbursement this Period</b>                                                                                    |
| Purpose of Disbursement Consulting<br>Candidate Name                                                                                 | <div> <div>500.00</div> <div>001</div> <div>Category/Type</div> </div>                                                            |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

**SUBTOTAL** of Disbursements This Page (optional) .....

1351.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 10

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Alhambra Democratic Club - Fed

A.

Full Name (Last, First, Middle Initial)

Mary Dorel

Mailing Address 501 E Longden Dr

City  
San Gabriel

State  
CA

Zip Code  
91775

Purpose of Disbursement  
Consulting

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21b000000000659357

Date of Disbursement

01 / 20 / 2009

Amount of Each Disbursement this Period

1265.00

B.

Full Name (Last, First, Middle Initial)

Dr Don's Buttons

Mailing Address 3906 W Morrow Dr

City  
Glendale

State  
AZ

Zip Code  
85308

Purpose of Disbursement  
Buttons

Candidate Name

006  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21b000000000659360

Date of Disbursement

02 / 19 / 2009

Amount of Each Disbursement this Period

566.00

C.

Full Name (Last, First, Middle Initial)

Fiesta Tacos

Mailing Address 14 S Fremont Ave

City  
Alhambra

State  
CA

Zip Code  
91801

Purpose of Disbursement  
Taco Bar for Event

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21b000000000659354

Date of Disbursement

01 / 20 / 2009

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional) .....

2231.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 10

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Alhambra Democratic Club - Fed

|                                                                                                                                      |                                                                                                                                                                                                                                                           |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Union Printing                                                                  | <b>Transaction ID:</b> SB21b000000000659361<br><b>Date of Disbursement</b>                                                                                                                                                                                |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 1220 N Broadway                                                                                                      | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 2 | 5 |  | 2 | 0 | 0 | 9 |
| M                                                                                                                                    | M                                                                                                                                                                                                                                                         | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0                                                                                                                                    | 4                                                                                                                                                                                                                                                         |        | 2 | 5 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Santa Ana State CA Zip Code 92701                                                                                               | <b>Amount of Each Disbursement this Period</b>                                                                                                                                                                                                            |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Printing                                                                                                  | <table border="1"> <tr> <td>565.00</td> </tr> </table>                                                                                                                                                                                                    | 565.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 565.00                                                                                                                               |                                                                                                                                                                                                                                                           |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name                                                                                                                       | <table border="1"> <tr> <td>003</td> </tr> </table> Category/<br>Type                                                                                                                                                                                     | 003    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 003                                                                                                                                  |                                                                                                                                                                                                                                                           |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                                                                                                                         |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>US Post Office                                                                  | <b>Transaction ID:</b> SB21b000000000659355<br><b>Date of Disbursement</b>                                                                                                                                                                                |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 10 W Bay State St                                                                                                    | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 0 | 2 |  | 2 | 0 | 0 | 9 |
| M                                                                                                                                    | M                                                                                                                                                                                                                                                         | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0                                                                                                                                    | 2                                                                                                                                                                                                                                                         |        | 0 | 2 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Alhambra State CA Zip Code 91802                                                                                                | <b>Amount of Each Disbursement this Period</b>                                                                                                                                                                                                            |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Postage                                                                                                   | <table border="1"> <tr> <td>71.00</td> </tr> </table>                                                                                                                                                                                                     | 71.00  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 71.00                                                                                                                                |                                                                                                                                                                                                                                                           |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name                                                                                                                       | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type                                                                                                                                                                                     | 001    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001                                                                                                                                  |                                                                                                                                                                                                                                                           |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                                                                                                                         |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>US Post Office                                                                  | <b>Transaction ID:</b> SB21b000000000659364<br><b>Date of Disbursement</b>                                                                                                                                                                                |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 10 W Bay State St                                                                                                    | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 3 | 0 |  | 2 | 0 | 0 | 9 |
| M                                                                                                                                    | M                                                                                                                                                                                                                                                         | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0                                                                                                                                    | 4                                                                                                                                                                                                                                                         |        | 3 | 0 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Alhambra State CA Zip Code 91802                                                                                                | <b>Amount of Each Disbursement this Period</b>                                                                                                                                                                                                            |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Postage                                                                                                   | <table border="1"> <tr> <td>935.00</td> </tr> </table>                                                                                                                                                                                                    | 935.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 935.00                                                                                                                               |                                                                                                                                                                                                                                                           |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name                                                                                                                       | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type                                                                                                                                                                                     | 001    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001                                                                                                                                  |                                                                                                                                                                                                                                                           |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                                                                                                                         |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

1571.00

**TOTAL** This Period (last page this line number only) .....

5153.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 10

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Alhambra Democratic Club - Fed

A.

Full Name (Last, First, Middle Initial)

Los Angeles County Democratic Central Committee

Mailing Address 1212 S Victory Bl

City Burbank State CA Zip Code 91502

Purpose of Disbursement  
Contribution

Candidate Name  
Los Angeles County Democratic Central Committee

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB230000000000659358

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional) .....

100.00

TOTAL This Period (last page this line number only) .....

100.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 10 / 10

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Alhambra Democratic Club - Fed

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Dorel, MaryNature of Debt (Purpose):  
Campaign Materials: shirt-  
s, DPSV Payment

Mailing Address 501 E Longden Dr

City State ZIP Code  
San Gabriel CA 91775

Outstanding Balance Beginning This Period

1106.00

Transaction ID: SD100000000000007572

Amount Incurred This Period

0.00

Payment This Period

1106.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Sharky, NinaNature of Debt (Purpose):  
Dr. Dons Buttons

Mailing Address 1027 S Atlantic Blvd #24

City State ZIP Code  
Alhambra CA 91803

Outstanding Balance Beginning This Period

1037.53

Transaction ID: SD100000000000007573

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1037.53

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Sharky, NinaNature of Debt (Purpose):  
Food for Office

Mailing Address 1027 S Atlantic Blvd #24

City State ZIP Code  
Alhambra CA 91803

Outstanding Balance Beginning This Period

37.88

Transaction ID: SD100000000000006731

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

37.88

**1) SUBTOTALS** This Period This Page (optional).....

1075.41

**2) TOTALS** This Period (last page this line number only).....

1075.41

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

1075.41